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27469 7590 12/02/2003

~~MALINCKRODT & MALINCKRODT~~
~~18 EXCHANGE PLACE, SUITE 500~~
~~SALT LAKE CITY, UT 84111~~

Pate Pierce & Baird
215 South State Street, Suite 550
Salt Lake City, UT 84111



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Gary D.E. Pierce	(Depositor's name)
<i>Gary D.E. Pierce</i>	(Signature)
March 1, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/828,645	04/05/2001	Yao Xiong Hu	146-1-002	5717

TITLE OF INVENTION: IMMUNOLOGICAL METHODOLOGY FOR DISCERNING HUMAN PAPILLOMAVIRUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	03/02/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SALIMI, ALI REZA	1648	435-007100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Pate Pierce & Baird
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Impact Diagnostics, Inc.

Salt Lake City, Utah

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Gary D.E. Pierce

March 1, 2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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03/05/2004 SFELEKE2 00000271 09828645

01 FC:2501
02 FC:1504

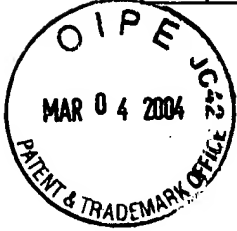
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Abby P.E. Price
Attorney for Applicant



PATENT
Docket No. 3352.2.1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Yao Xiong Hu)	
)	
Serial No.:	09/828,645)	
)	Art Unit
Filed:	April 5, 2001)	1648
)	
For:	IMMUNOLOGICAL METHODOLOGY FOR DISCERNING HUMAN PAPILLOMAVIRUS)	
)	
Examiner:	Ali Reza Salimi)	
)	
Date of Notice of Allowance:	December 2, 2003)	

TRANSMITTAL AND PAYMENT OF ISSUE AND PUBLICATION FEES

Mail Stop Issue Fee
Commissioner for Patents
P.O Box 1450
Alexandria, VA 22313-1450

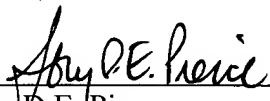
Sir:

The enclosed Issue Fee Transmittal Form is submitted herewith pursuant to M.P.E.P. § 603.01 for filing in the matter of the United States patent application as hereinabove identified. Enclosed is Form PTO-2038 authorizing credit card payment in the amount of Nine Hundred Sixty-Five Dollars (\$965.00) to cover the issue and publication fees which are due in this matter.

Please address all future correspondence in connection with the above-identified patent application to the attention of the undersigned.

DATED this 1st day of March, 2004.

Respectfully submitted,



Gary D.E. Pierce
Attorney for Applicant
Registration No. 38,019

Date: March 1, 2004

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